DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814 (916) 322-2978

May 14, 1985

ALL-COUNTY INFORMATION NOTICE 1-35-85

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT:

REVISED STATISTICAL REPORT FORM CA 237 FG/U AND SOURCE

GUIDES (CA 237 FG/U AND CA 237 FC)

REFERENCE: MANUAL OF POLICIES AND PROCEDURES - STATISTICAL REPORTS

SECTION 26-212.90 and ACIN I-19-85

The purpose of this letter is to provide:

1. Revised statistical report form, CA 237 FG/U (2/85).

2. Updated CA 237 FG/U source guide.

Revised CA 237 FC source guide.

As you were informed in ACIN I-19-85, dated February 26, 1985, the CA 237 FG/U reporting requirements were revised effective 2/85 report month due to revisions of the CA 800 claims. The CA 237 FG/U form has been revised to incorporate these changes. In addition, items 11a(3), cols. 1 & 2 and 13a were added for state use only. For immediate usage, you may photocopy the attached copy of the revised CA 237 FG/U form. A supply of the forms is available in our warehouse and may be ordered in the usual manner.

At the request of several counties, the CA 237 FC source guide was revised to update terminology from BHI to FC and to direct reference to current line items on the CA & CS 800 claims in use at this time.

It is hoped that the revised form and instructions will assist you in preparing your monthly reports. If you require further assistance, please contact Winnie Barber, Statistical Services Branch at (916) 322-2978 or ATSS 492-2978.

Sincerely,

ROBERT T. SERTICH

heet Section

Deputy Director

Administration

Attachments

cc: CWDA

AID TO FAMILIES WITH DEPENDENT CHILDREN — ASH GRANT CASELOAD MOVEMENT AND EXPENDITURES REPORT

Send One Copy To:

DEPARTMENT OF SOCIAL SERVICES STATISTICAL SERVICES BRANCH 744 P STREET, MAIL STATION 12-81 SACRAMENTO, CALIFORNIA 95814

		STATE USE	COUNTY		
****		with the second	FOR MONTH ENDING	MONTH /	YEAR
PART A. APPLICATIONS FOR AID AND REQUESTS FOR RESTORATION		(1)	(2)		
1.	Pending from last month (Item 5 last month, or explain)				
2.	Received during the month (Sum of a and b, below)				
•	a. Applications (Sum of (1) and (2))				
	(1) For AFDC-FG.				
	(2) For AFDC-U		9301000		
	b. Requests for restoration				
~					
3.	Total during the month (Sum of 1 and 2)				
4.	Disposed of during month (Sum of a, b, and c, below)				
	a. Approved (Sum of (1) and (2))		ļ.,,,,,,,	_	
	(1) For AFDC-FG or U (Same as sum of 7a and 7b)		000000		
	(2) For Emergency Assistance-Unemployed Parent (Do not incl	lude in 7a or 7b)	00074300 00074300 00074300	1	
	b. Denied				
	c. Other dispositions (Cancellations and withdrawals)				
5.	Investigation proceeding at end of month (3 minus 4)				
λR	T B. CASELOAD		AFDC—FG	AFDC-	-U
6.	Cases brought forward from last month (Item 10 last month or expla	ain)			
	·	•			
7.	Cases added during month (Sum of a through e below)				
	a. Applications approved				
	b. Restorations		700000		
	c. Transfers from other counties				
	d. Intraprogram status change (1) from FG or U segment		100000		
	(2) from medically needy		#150.000 #150.000 #150.000		
	(3) from Emergency Assistance		100 (100) 100 (100) 100 (100)		
0	e. Other approvals				
8.	Total cases open during month (Sum of 6 and 7, above; also a plus		20000		59056
	a. Cases receiving cash grant		1	,	
	(1) Children in Item 8a cases		1)] () () () () () () () () ()
	(3) Total persons (Sum of (1) and (2) above)				1
	b. Other cases				
			\$12 Jili i i i		10000000
9.	Terminated or changed in status during month	• • • • • • • • • • • • • • • • • • • •			
10.	Cases carried forward to next month (8 minus 9)				
PAR	C. NET EXPENDITURES		TOTAL (ROUND TO N	EAREST DOLL	AR)
11.	Total net expenditures (Minus a(1) - a(2) below)		\$	\$	
	a. Child support collections: (1) FG \$ (2) U \$	(3)	\$	\$	

			.81
			721
			.91
	CIAL SERVICES	OS 40 TNEMTRA49	PART F. TO BE USED ONLY ON INSTRUCTIONS FROM THE D
			16. Applications and requests for restoration pending at end of quarter (Sum of 14a + 14b — 14b.)
			(3) Otherwise disposed of (cancellations & withdrawals)
	10000000 00000000 00000000000000000000		(2) Denied
38888888 			(1) Approved
			c. Disposed of during quarter (Sum of (1), (2) & (3), below)
(b. Received during quarter
		8	a. Pending from prior quarter
			14. Time elapsed from date of application or request for restoration (Report quarterly only-Mar., June, Sept., Dec.)
(3)	(2)	(1)	, and the state of
NAHT 380M 8YAU 34	OB FESS	OF APPLICATIONS	
LENGTH OF TIME		NUMBER	
stroger yldtnom se	ends on PARA. for the thre	ithe corresponding ite	NOTE: Items 14. through 15., Column 1, must agree with the sum of the quarter.
		OF APPLICATIONS	PART E. QUARTERLY INFORMATION ON THE PROCESSING
	7		
BSU BTATE			
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RESPER	STATUS CHANGE	_	
P. INTERCOUNTY	MARDORARINI &		PART D. SPECIAL INFORMATION
			PART CECTARACTIAL INCOME

AID TO FAMILIES WITH DEPENDENT CHILDREN - FG/U CASH GRANT CASELOAD MOVEMENT AND EXPENDITURES REPORT

Form CA 237 FG/U				
Form CA 237 FG/U ltem	Source			
Part B. CASELOAD: FAMILY GROUPS, COLUMN 1; UNEMPLOYED, COLUMN 2				
8a. Cases receiving cash grant	Form ABCD 801			
8a.(1) Children	Form CA 800 (1/85), (Columns A + B Children), Lines 1 + 2 minus current month's children in Lines 3, 8, and (†) 9.			
8a.(2) Adults	Form CA 800 (1/85), (Columns A + B, Adults), Lines 1 + 2 minus current month's adults in Lines 3, 8 and (±) 9.			
Part C. NET EXPENDITURES: FAMILY GROUP	PS, COLUMN 1; UNEMPLOYED, COLUMN 2			
ll. Total net expenditures	Form CA 800 (1/85), Column C, Line 22 minus Form CS 800 (9/84), Line B3.			
lla. Child support collections FG/U	Form CS 800 (9/84), Line B3.			
NOTE. Use the <u>current</u> month's Forms CA 800 (FG/U) Aid Claim and ABCD 801 Aid Payroll and <u>prior</u> month's CS 800 Child Support Claim for obtaining expenditures data. Form CA 800 (1/85): Summary Report of Assistance Expenditures - AFDC FG/U. Form CS 800 (9/84): Summary Report of Child and Spousal Support Payments - FG/U.				

Form ABCD 801: Aid Payroll

SOURCE GUIDE

AID TO FAMILIES WITH DEPENDENT CHILDREN - FOSTER CARE CASELOAD MOVEMENT AND EXPENDITURES REPORT FORM CA 237 FC

FORM CA 237 FC ITEM	SOURCE		
Part B. AFDC-FC CASELOAD			
8a. Received AFDC-FC	Forms CA 800 FC (Fed.)(1/83), and CA 800A FC (Nonfed)(1/83), Column A, Lines 1 + 2 minus current month's persons in Lines 3, 8 and (±) 9.		
Part C. NET EXPENDITURES			
ll. Total Net Expenditures for FC	Forms CA 800 FC (Fed.)(1/83), Column B. Line 18, plus CA 800A FC (Nonfed)(1/83), Column B, Line 17, minus (CS 800)(9/84), Line B3		
lla. Foster Family Homes	Form ABCD 801, Total payments for Foster Family Homes.		
llb. Group Home Placements	Form ABCD 801, Total Payments for Group Home Placements.		
llc. Child Support Collections: (1) Federal	Form CS 800 (9/84), Column 4, Lines A5 + A6		
(2) Nonfederal	Form CS 800 (9/84), Column 4, Line A7		
Part D. SPECIAL INFORMATION			
12. AFDC-FC Children in Foster Family Homes	Columns 1 and 2: a/ Form ABCD 801 and/or other applicable county records, current month's children broken out by federal and nonfederal		
13. AFDC-FC Children in Group Home Placements	Column 3: Form ABCD 801, Total Families for FC children with federal participation.		
	Column 4. Form ABCD 801, Total Payments for FC children with federal participation.		
NOTE. Use the current month's Forms CA 800 FC (Fed), CA 800A FC (Nonfed) Aid Claims. ABCD 801 Aid Payroll, and prior month's Form CS 800 Child Support Claim for obtaining expenditures data. a/ The sum of Items 12 and 13, Columns 1 and 2, must equal Item 8a, Form CA 237 FC Form CA 800 FC (Fed)(1/83): Summary Report of Assistance Expenditures. Form CA 800A FC (Nonfed)(1/83): Summary Report of Assistance Expenditures. Form CS 800 (9/84). Summary Report of Child and Spousal Support Payments (FC). Form ABCD 801: Aid Payroll			